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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) In re Application Number: 09/927,731 / Filed: August 10, 2001 For SULFONATED ALIPHATIC-AROMATIC COPOLYESTERS Group Art Unit Examiner 1711 Examiner	Ur	nder the Pap	perwork Reduction Act of 1995, n	o persons are required to respo	nd to a collection of informati	on unless it displays a valid OMB control num	iber.
reply in the above identified application. The requested extension and appropriate non-small-entity fee are as follows (check time period desired): One month (37 CFR 1.17(a)(1))	PETITIO	N FOR	EXTENSION OF T	IME UNDER 37 CF	R 1.136(a)	Docket Number (Optional) PT-0043 US NA	W PEO
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(check time period desired): One month (37 CFR 1.17(a)(1))			•	, ,) to extend the perio	d for filing a	
Two months (37 CFR 1.17(a)(2)) Three months (37 CFR 1.17(a)(3)) Four months (37 CFR 1.17(a)(4)) Five months (37 CFR 1.17(a)(5)) Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$		•	• • • •	priate non-small-entity	y fee are as follows		
Three months (37 CFR 1.17(a)(3)) Four months (37 CFR 1.17(a)(4)) Five months (37 CFR 1.17(a)(5)) Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$		· 🛛	One month (37 CFR	1.17(a)(1))		\$ <u>110.00</u>	
Four months (37 CFR 1.17(a)(4))			Two months (37 CFR	(1.17(a)(2))		\$.,
Five months (37 CFR 1.17(a)(5))			Three months (37 CF	R 1.17(a)(3))		\$	
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Commissioner has already been authorized to charge fees in this application to a Deposit Account. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-1928. I have enclosed a duplicate copy of this sheet. I am the □ applicant/inventor. □ assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). □ attorney or agent of record. ☑ attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). 40.379. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. July 10, 2003 Date Signature Gail Ann Dalickas Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			Four months (37 CF	R 1.17(a)(4))		\$	
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□ attorney or agent of record. □ attorney or agent under 37 CFR 1.34(a). □ Registration number if acting under 37 CFR 1.34(a). □ Registration number if acting under 37 CFR 1.34(a). 40.979. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. □ July 10, 2003 □ Date □ Signature □ Gail Ann Dalickas □ Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		A che Payme The C applic The C or cre I have	eck in the amount of the ent by credit card. For commissioner has alrea- tation to a Deposit Acc commissioner is hereby edit any overpayment, e enclosed a duplicate applicant/inventor.	e fee is enclosed. Im PTO-2038 is attact ady been authorized to ount. If authorized to charge to Deposit Account N copy of this sheet.	hed. to charge fees in this e any fees which ma lumber 04-1928 .		
Marning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. July 10, 2003 Date Signature Gail Ann Dalickas Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					d. (Form PTO/SB/9	96).	
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Gail Ann Dalickas Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		Ju	ıly 10, 2003		Lail	Halicka	
Typed or printed name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit more than one signature is required, see below*.	_		Date		7	Signature	
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multiple forms if more than one signature is required, see below*.					ly	ped or printed name	
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Application No. 09/927,731

Attorney Docket No: PT-0043 US NA

Amendment and Response Pursuant to 37 CFR § 1.111

Petition For Extension Of Time

Fee Transmittal

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